## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/506287

| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN  |  |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |
|---|--|---------------------------------|----------------------|--------------------------|--------------|------------------|----|---------------------|------------------------|-----|---------------------------------------|------------------------|
|   |  | ·                               | (Column 1)           |                          | (Column 2)   |                  |    | TYPE                |                        | OR  | OTHER THAN SMALL ENTITY               |                        |
| TOTAL CLAIMS  |  |                                 | 10                   |                          |              | •                |    | RATE                | FEE                    | 7 . | RATE                                  | FEE                    |
| FOR   |  |                                 | NUMBER FILED         |                          | NUMBER EXTRA |                  |    | BASIC FEE           |                        | OR  | BASIC FEE                             | 258                    |
| TC  | TAL CHARGE   | ABLE CLAIMS                     | / <b>6</b> minus 20= |                          | •            |                  |    | XS 9=               |                        | ÖR  | XS18=                                 | 100                    |
| INC   | EPENDENT CI  | LAIMS                           | minus 3 =            |                          | #            |                  |    | X43=                |                        |     | X86=                                  |                        |
| ML  | ILTIPLE DEPEN  | NDENT CLAIM P                   | RESENT               | ENT                      |              |                  |    |                     |                        | OR  | \\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |                                 |                      |                          |              |                  |    | +145=               |                        | OR  | -290=                                 |                        |
|   |  |                                 |                      |                          |              |                  |    | TOTAL               | <u> </u>               | OR  | TOTAL                                 | 900                    |
|   | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |                                 |                      |                          |              |                  |    | SMALL               | ENTITY                 | OR  | OTHER<br>SMALL                        |                        |
|   | CLAIMS   |                                 | HIGHEST              |                          |              | 1                |    |                     | 1                      |     |                                       |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT |                      | NUMB<br>PREVIO<br>PAID F | USLY         | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                                  | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *                               | Minus                | **                       | ·····        | =                |    | XS 9=               |                        | OR  | X\$18=                                |                        |
| AME   | Independent  | *                               | Minus                | ***                      | 2            | = .              |    | X43= ·              |                        | OR  | X86=                                  |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                                 |                      |                          |              |                  |    | +145=               |                        | OR  | +290=                                 |                        |
|   |  |                                 |                      |                          |              |                  |    | TOTAL               |                        |     | TOTAL                                 |                        |
| •   |  |                                 |                      |                          |              |                  |    | ADDIT. FEE          |                        | OR  | ADDIT. FEE                            | ·                      |
|   |  |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |
| œ   |  | CLAIMS<br>REMAINING             | 1                    | HIGHE<br>NUMBI           |              | PRESENT          |    |                     | ADDI-                  |     |                                       | ADDI-                  |
| AMENDMENT B   |  | AFTER<br>AMENDMENT              |                      | PREVIO<br>PAID F         | USLY<br>OR   | EXTRA            |    | RATE                | TIONAL<br>FEE          |     | RATE                                  | TIONAL<br>FEE          |
| NON   | Total  | *                               | Minus                | 44                       |              | -                |    | X\$ 9=              |                        | OR  | X\$18=                                |                        |
| AME   | Inaependent  | NT47101 05 111                  | Minus                | ***                      |              | =                |    | X43=                |                        | OR: | X86=                                  |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |
|   |  |                                 |                      |                          |              |                  | Ŀ  | +145=               |                        | OR. | +290=                                 |                        |
|   |  |                                 |                      |                          |              | ٠                |    | TOTAL<br>ADDIT. FEE |                        | OR  | TOTAL<br>ADDIT. FEE                   |                        |
|   | (Column 1) (Column 2) (Column                                |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |
| ပ   |  | CLAIMS<br>REMAINING             |                      | HIGHE<br>NUMB            |              | DOCCENT          | Ιr |                     | ADDI-                  |     |                                       | ADDI-                  |
| AMENDMENT C   |  | AFTER<br>AMENDMENT              |                      | PREVIO                   | USLY         | PRESENT<br>EXTRA |    | RATE                | TIONAL<br>FEE          |     | RATE                                  | TIONAL                 |
| NDM   | Total  | •                               | Minus                | trk                      |              | =                |    | X\$ 9=              | , , , ,                | OR  | X\$18=                                |                        |
| <b>AME</b>  | Independent  | •                               | Minus                | ***                      |              | = .              |    | X43=                |                        |     | X86=                                  |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                                 |                      |                          |              |                  |    | 7,40-               |                        | OR  | 700=                                  |                        |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |                                 |                      |                          |              |                  |    | +145=               |                        | OR  | +290=                                 |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter 20   |  |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |
| **If the *Highest Number Previously Paid For* IN THIS SPACE is less than 3, enter *3.*  **The *Highest Number Previously Paid For* (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                 |                      |                          |              |                  |    |                     |                        |     |                                       |                        |

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